

Form CPF 18A: Report of Independent Expenditure Promoting Election or Defeat of Candidate(s)

Office of Campaign and Political Finance

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ce of Campaign and Political Finance Ashburton Place ton, MA 02108 7) 727-8352.			
Date of Papart			
Date of Report.	(Must be filed within 7 business days		
Expenditure(s) Made By:	Massachusetts Nurs	es Association	
A CONTRACTOR OF THE CONTRACTOR	(Name of individual or grou	ip making expenditure)	
	010 = 11 0	Canton	02021
	340 Turnpike St		Zip
Name of Candidate(s) For	Whom the Above Expenditure(s)	Election or Defeat Promoted:	
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		1	
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		<u>(6)</u>	N
Expenditure(s):			
	ce of Campaign and Political Finance Ashburton Place ton, MA 02108 7) 727-8352 Date of Report: Expenditure(s) Made By: Name of Candidate(s) For	Date of Report: November 6,	Date of Report: November 6, 2006

Date Paid	To Whom Paid	' Address	Purpose	Amount
11/¼/06 Sa	Saltus Press	24 Jolma Rd.	Mailing	.159.6
		Worc. 01604		
11/3/06	Saltus Press	24 Jolma Rd.	Mailing	118.45
		Worc. 01604		

I hereby certify the expenditures noted are independent expenditures, as defined by M.G.L. c.55, section 18A:

(1) the individual(s) or group who made the expenditure(s) described herein did not solicit or receive any contributions in contemplation of such expenditure(s); and

(2) the individual(s) or group who made the expenditure(s) described herein did not cooperate, consult or act in concert with or at the request or suggestion of any candidate, or political committee organized on behalf of any candidate, or any agent of a candidate or any political committee in making such expenditure(s).

I further certify that all statements made herein are true and accurate.

Signed under the penalties of perjury:

Katrina Anderson Director, Legislation and Government Affairs

Print Name of Individual Signer and Title (if signing on behalf of a group)